

ADULT

BASIC LIFE SUPPORT GUIDELINE

PRESCRIBED INHALER

Reasonable certainty of On-Line Medical Direction required for use.

INDICATIONS:

- Patient exhibits signs and symptoms of respiratory distress; decreased breath sounds or wheezing heard
- AND
- Has a physician prescribed bronchodilator inhaler.

POTENTIAL ADVERSE EFFECTS:

- Increased pulse rate.
- Tremors, nervousness or agitation.

CONTRAINDICATIONS:

- Patient is not alert enough to use the device. The EMT may only assist the patient with self-administration. The EMT is not permitted to administer this medication.
- Inhaler is not prescribed to patient. NOTE: Product packaging may not have a patient-specific label. Consult with medical direction.
- The medication has expired.
- The medication name or expiration date cannot be determined. Consult with medical direction.

PRECAUTIONS:

- If at any time the patient condition deteriorates, be prepared to intervene with assisted ventilation.

1. Assess the patient, apply oxygen, or assist ventilation, as needed.
2. Obtain baseline vitals and consider transport plan based on general impression.
3. Inspect the prescribed inhaler and document findings:
Right Patient: Is medication prescribed for this patient?

Right Medication and Form: Check medication name and expiration date. Only bronchodilators such as the following are included for consideration in the metered dose inhaler aerosolized form: (If medication contained within inhaler not listed contact On-Line Medical Control.)

Albuterol (Proventil, Ventolin)
Metaproterenol (Metaprel, Alupent)
Ipratropium (Atrovent)
Isoetharine (Bronkosol, Bronkometer)
Bitolterol mesylate (Tornalalte)
Salmeterol xinafoate (Serevent)

Ensure inhaler is at least room temperature. Determine if inhaler should be shaken or not shaken.

Route: Inhaled. Use spacer if patient has one.

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Right Dose: Physician prescribed dose, Typically 2 doses (4 puffs total) over 30 minutes

4. Check to see if the patient has already taken any doses.
5. Describe procedure to patient.
6. Assist with medication administration by:
 - a. Shake inhaler, if appropriate and remove end cap. Attach to spacer if provided.
 - b. Remove oxygen mask from the patient (A nasal cannula may be left in place).
 - c. Have the patient exhale fully then put their lips around the opening of the inhaler or spacer.
 - d. Have the patient actuate the handheld inhaler once as they begin to inhale deeply, for about 6 seconds. If spacer whistle sounds, instruct patient to slow the rate of inhalation.
 - e. Instruct the patient to hold their breath for about 10 seconds or as long as they comfortably can so the medication can be absorbed, then exhale slowly.
7. **Replace oxygen.**
8. Wait 1 minute and repeat steps 6. a-e for 2nd puff.
9. **Replace oxygen.**
10. Repeat steps 6-8 for 3rd and 4th puff, if needed.
11. Contact On-Line Medical Control if breathing difficulty is not relieved. Additional doses may be recommended.
12. Record time of administration, dose given, and patient response, including any side effects.
13. Reassess patient, be prepared to suction or assist ventilations as needed.
14. Transport patient immediately, continue treatment en route to hospital.

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